

CLAIMS ONLY

Application Number
9/989/88

Filing Date

Applicant(s)

* May be used for additional claims or amendments			
	*	*	

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3	1					
4		2				
5		2				
6		2				
7		2				
8		2				
9		2				
10		2				
11		2				
12		2				
13		2				
14		2				
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16		2				
17		2				
18		2				
19		2				
20		2				
21		2				
22		2				
23		2				
24	1					
25	1					
26	1					
27	1					
28	1					
29		1				
30		1				
31		1				
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38	1					
39		1				
40		1				
41		1				
42		1				
43		1				
44		1				
45		1				
46		1				
47						
48		1				
49						
50						
Total Indep	8					
Total Depend	58					
Total Claims	66					

* May be used for additional claims or amendments

	*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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98						
99						
100						
Total Indep						
Total Depend						
Total Claims						